
SUPPLEMENTAL APPLICATION DATA SHEET

COPY**Application Information**

Application number:: 10/799,348
Filing Date:: 03/12/04
Application Type:: Regular
Subject Matter:: Utility
Title:: METHODS AND SYSTEMS FOR MEDICAL LIGHTING
Attorney Docket Number:: C1104-7122.30
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 2
Total Drawing Sheets:: 28
Small Entity?:: No
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Patent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Given Name:: Kevin
Middle Name:: J.
Family Name:: Dowling
Name Suffix::
City of Residence:: Westford
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 23 Village View Road
City of mailing address:: Westford
State or Province of mailing address:: MA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 01886

Application Serial No. 10/799,348
Attorney Docket No. C1104-7122.30

Applicant Information

Applicant Authority Type::
Primary Citizenship Country::
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

Inventor
US
Robert
V.
O'Toole
III
Boston
MA
US
1353 Beacon Street, Apt. 1
Boston
MA
US
02446

COPY**Applicant Information**

Applicant Authority Type::
Primary Citizenship Country::
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

Inventor
US
Michael
K.
Blackwell

Milton
MA
US
357 Blue Hills Parkway
Milton
MA
US
02186

Application Serial No. 10/799,348
Attorney Docket No. C1104-7122.30

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Given Name:: Frederick
Middle Name:: M.
Family Name:: Morgan
Name Suffix::
City of Residence:: Quincy
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 157 Butler Road
City of mailing address:: Quincy
State or Province of mailing address:: MA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 02169

COPY**Correspondence Information**

Correspondence Customer Number:: 37462
Phone Number:: (617) 395-7000
Fax Number:: (617) 395-7070

Representative Information

Representative Customer Number::	37462
----------------------------------	-------

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application 10/799,348	An application claiming the benefit under 35 U.S.C. 119(e)	60/454,039	03/12/03
<u>This Application</u> <u>10/799,348</u>	<u>Continuation-in-part</u>	<u>09/716,819</u>	<u>11/20/00</u>
<u>This Application</u> <u>10/799,348</u>	<u>Continuation-in-part</u>	<u>09/923,223</u>	<u>08/06/01</u>
<u>09/923,223</u>	<u>An application</u> <u>claiming the benefit</u> <u>under 35 U.S.C.</u> <u>119(e)</u>	<u>60/222,847</u>	<u>08/04/00</u>

Application Serial No. 10/799,348
Attorney Docket No. C1104-7122.30

<u>09/923,223</u>	<u>An application claiming the benefit under 35 U.S.C. 119(e)</u>	<u>60/235,678</u>	<u>09/27/00</u>
<u>This Application 10/799,348</u>	<u>Continuation-in-part of</u>	<u>10/325,635</u>	<u>12/19/02</u>

Assignee Information

Assignee name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Postal or Zip Code of mailing address::

Color Kinetics, Inc.
10 Milk Street, Suite 1100
Boston
MA
02108

COPY